FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

CAMPAIGN DISCUSSURE OF

2010 MAY 19 PM 2:54

COMMITTEE NAME (Must be same as on Statement of Or	manization)		
,	•	FORM	4
Re-Election of Wally 2	orn	DR-	-2 DISCLOSURE
IMPORTANT: Indicate by # type of committee you are reporting to (1) Statewide/Legislative/Judge Standing for Retention Candidate	r: (2)State PAC (3)State Party	(Rev. 12	2/2009) REPORT
(4)County Central Committee (5)County Candidate (6)City Car Subdivision Candidate (8)County PAC (9)City PAC (10)Scho	ndidate (7)School Board or Other Political	For Offic	e Use Only
11) Local Ballot Issue	bi Board of Other Political Subdivision PAC (Comm. #	51
CANDIDATE COMMITTEES ONLY:		Logged	<u> </u>
Candidate Name	Political Party (if applicable)	Scanned	
WALLY E HORN	Democrat		т
Office Sought Lowa Senator	District (if Senate or House)	Audited	
	19	J [
Late reports are subject to possible civil and criminal penalties. Figure 1 candidate's committee, and the chairperson, for any other type of	Pursuant to lowa Code sections 68B.32A(7) of committee, is the individual responsible fo	and 68A.401(r filing timely a	 the candidate, for a and accurate reports.
solutions of continues of and the charpeness, to day continues of			
0/1/2/1/	319-396-3131		may 19 min
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	/	May 19, 2010 DATE/SIGNED
SIGNATURE OF PERSON FILING REPORT	IELEPHONE		DATOGONED
LAMFILING A MAIL 19	REPORT FOR (1) ELECTION ((2)	NON-ELEC	TION YEAR.
I AM FILING A May 19 (report date)	Indicate by #	7	
CHECK IF AMENDMENT TO REPORT DATED			
	Lo	cal Committee:	s, enter Date of Election
☐ Check if this is final (termination) report and attach Notice	e of Dissolution Form DR-3.	umb 8 Local C	ommittees, enter County in
(You must continue to file reports until a DR-3 is fil		ich Election is	
	<u> </u> _		
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For Instructions, See Back of Form CONTRIBUTIONS MONEY TAKEN IN		(EN IN	et Form	SCHEDU A (Rev. 07)	MONETA	• •
(Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) Re-Election of Wally Llorn				CHECK THIS BOX IF AMENDING FORM		
	PAC CHECK NUMBER IN	BUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAIL				
RESPONSIBILITI	ES AND SHOULD IMME	INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 T DIATELY CONTACT THE BOARD.				
		ts the use of information copied from reports and stater r than statutory political committees.	nents for solid	iting contri		У
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIO TO CAN (if appli	DIDATE*	AMOUNT RECEIVED	√ IF FO FUND RAISEI INCOM
1/5/2010	CK# 3162	Toward for Killed Workforce 707 East Locust St JX5 Moines, IA 50309			\$ 250 av	
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TOTAL (if last page of this schedule)

SUB-TOTAL

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page / of / (for Schedule A)